

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 601192	RECEIPT DATE:	07 / 28 / 00
IA NUMBER:	PCT/ JP99 / 06704	IA FILING DATE:	11 / 30 / 99
FAMILY NAME:	SIRAJ	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	AIMAL	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	11 / 30 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:		COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 7036425705
			FAX

NAME: VINCENT L RAMIK ESQUIRE

STREET: 7345 MCWHORTER PLACE  
SUITE 101

CITY: ANNANDALE

STATE/COUNTRY: VA ZIP: 22003

EMAIL:

APPLICATION TITLES:  
COMMUNICATION SYSTEM

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/601,192	<b>FILING DATE</b> 07/28/2000 <b>RULE</b> -	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2736	<b>ATTORNEY DOCKET NO.</b> -	
<b>APPLICANTS</b> AIMAL SIRAJ, MEGURO-KU, JAPAN; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/JP99/06704 11/30/1999 <b>** FOREIGN APPLICATIONS *****</b> JAPAN 340599 11/30/1998 <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 08/29/2000</b> -					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> DILLER RAMIK & WIGHT 7345 MCWHORTER PLACE MERRION SQUARE SUITE 101 ANNANDALE, VA 22003					
<b>TITLE</b> COMMUNICATION SYSTEM					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 7023

<b>SERIAL NUMBER</b> 09/601,192	<b>FILING DATE</b> 07/28/2000 <b>RULE</b>	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2736	<b>ATTORNEY DOCKET NO.</b>
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**APPLICANTS**  
AIMAL SIRAJ, MEGURO-KU, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A 371 OF PCT/JP99/06704 11/30/1999 *JK*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
JAPAN 340599 11/30/1998 *JK*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* 08/29/2000**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

**ADDRESS**  
DILLER RAMIK & WIGHT  
7345 MCWHORTER PLACE  
MERRION SQUARE SUITE 101  
ANNANDALE, VA 22003

**TITLE**  
COMMUNICATION SYSTEM

<b>FILING FEE RECEIVED</b> 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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